

A-217 Room C, 10/17/2000 2:00 PM - 4:00 PM (PS)
Reversibility of Myocardial Molecular Remodeling in Human Heart Failure *P.M. Heerd, MD, PhD; A. The, BA; M. Schlame, MD, Anesthesiology, Cornell University, New York, NY, United States.* The study demonstrated disease-specific reverse molecular remodeling of the mitochondria and sarcoplasmic reticulum in LVAD-supported hearts broadly categorized as ischemic or dilated cardiomyopathy.

A-218 Room C, 10/17/2000 2:00 PM - 4:00 PM (PS)
Atrial Fibrillation after CABG Surgery Is Unrelated to Pre-Existing Cardiac Structural or Functional Abnormalities *Charles W. Hogue, Jr., M.D.; Nikolaos J. Skubas, M.D., Anesthesiology, Washington University School of Medicine, St. Louis, MO, United States.* Cardiac structure and functional abnormalities do not appear prevalent in patients developing atrial fibrillation after CABG surgery.

A-219 Room C, 10/17/2000 2:00 PM - 4:00 PM (PS)
Hyperprocalcitonemia Is Related to Non-Infectious Postoperative Severe SIRS Associated with Coronary Artery Bypass Grafting *Francois Kerbaul, MD; Catherine Guidon, MD; Muriel Molot, MD; Thierry Mesana, MD, PhD; Francois Gouin, MD, PhD, Departments of Anesthesia and Cardiac Surgery, Timone Hospital, Marseille, France.* PCT is a marker of postoperative severe SIRS after cardiac surgery.

A-220 Room C, 10/17/2000 2:00 PM - 4:00 PM (PS)
Coronary Subclavian Steal Syndrome (CSSS) in Patients Undergoing Noncardiac Surgery *K.B. Kern, MD; J.E. Bauder-Heidt, RN; L.G. Hughes, RN; C.A. Sulek, MD; E.B. Lobato, MD, Department of Anesthesiology, Univ. of Fla. and VAMC, Gainesville, FL, United States.* CSSS is relatively common in patients with post CABG angina, and should routinely be included in the differential diagnosis.

A-221 Room C, 10/17/2000 2:00 PM - 4:00 PM (PS)
Oral Treatment with Nicorandil(N) Prior to Coronary Artery Bypass Graft Surgery (CABGS) *Jean-Jacques Lebot, MD, PhD; Pascale Blanc, MD; Helene Bouvier, MD; Claude Girard, MD, PhD; Michel Ovize, MD, PhD, Anesthesiology, Hopital L. Pradel, Lyon, France.* Perioperative hypotension has been reported after N treatment. In this randomized study, no deleterious hemodynamic effect of N was reported.

A-222 Room C, 10/17/2000 2:00 PM - 4:00 PM (PS)
Morphine Activates K_{ATP} Channels and Reduces Ischemia Reperfusion Injury in Cultured Myocytes *Bradley C. McPherson, BA; Zuobui Shao, MD; Lance B. Becker, MD; Solomon Aronson, MD; Zhenbai Yao, MD, PhD, Department of Anesthesia and Critical Care, The University of Chicago, Chicago, IL, United States.* Opioid receptor activation and K_{ATP} channel opening decrease free radical production during reperfusion.

A-223 Room C, 10/17/2000 2:00 PM - 4:00 PM (PS)
The Relationship between Laryngoscopic Attempts and Airway Complications: Should We Limit Attempts to 3 during Emergency Intubation? *Thomas C. Mort, MD; Ricardo Gotay, MD, Anesthesiology, Hartford Hospital, UCONN, Hartford, CT, United States.* A direct relationship exists between the number of intubation attempts during emergency intubation in the remote location and critical airway events.

A-224 Room C, 10/17/2000 2:00 PM - 4:00 PM (PS)
Prolonged Suppression of the Hypothalamic-Pituitary-Thyroid Axis after Cardiac Surgery *Yoshiyuki Naito, M.D.; Sboji Arisawa, M.D.; Hiromasa Kobayashi, M.D.; Michihiro Nasu, M.D., Department of Anesthesia, Kobe City General Hospital, Kobe, Japan.* A detailed analysis of the hypothalamic-pituitary-thyroid function revealed that low T3 syndrome continued for 5 days after uncomplicated CABG.

A-225 Room C, 10/17/2000 2:00 PM - 4:00 PM (PS)
Delineation of Peripheral Vasomotor Activity during Extracorporeal Circulation *Mibai Podgoreanu, M.D.; Robert G. Stout, M.D.; Elie M. Ferneini, M.H.S.; Ashraf Gboshay, M.D.; David G. Silverman, M.D., Anesthesiology, Yale University School of Medicine, New Haven, CT, United States.* This study documented the presence of peripheral vasomotor activity during cardiopulmonary bypass.

A-226 Room C, 10/17/2000 2:00 PM - 4:00 PM (PS)
NF- κ B Activation Is a Possible Mechanism for Proinflammatory Cytokines Release in Trauma Patients *Tetsuhiro Sakai, MD; Gary E. Hill, MD; Akira Kudoh, MD; Akitomo Matsuki, MD; Charles W. Whitten, MD, Department of Anesthesiology, University of Hiroaki, Hiroaki, Aomori, Japan.* Trauma induce a synthesis and release of IL-6 depend on the magnitudes of the trauma by activation of NF- κ B.

A-227 Room C, 10/17/2000 2:00 PM - 4:00 PM (PS)
A Comparison of Equipotent Doses of Dopamine, Dobutamine or Dopexamine on Prolactin Release in High Risk Surgical Patients *Thomas Schilling, M.D.; Matthias Grundling, M.D.; Klaus-Uwe Moritz, M.A., Ph.D.; Thomas Hachenberg, M.D., Ph.D.; Michael Wendt, M.D., Ph.D., Dept. of Anesthesiology, Ernst-Moritz-Arnt-University, Greifswald, Germany.* DX and DO had no effects on serum prolactin, DA suppressed prolactin release.

A-228 Room C, 10/17/2000 2:00 PM - 4:00 PM (PS)
Phenylephrine Increases Blood Flow in Grafted Radial Artery Used in Coronary Artery Bypass Surgery *Nikolaos J. Skubas, MD; Hendrik B. Barner, MD; Ioanna Apostolidou, MD; Demetrios G. Lappas, MD, Anesthesiology, Washington University in Saint Louis, Saint Louis, MO, United States.* Phenylephrine increased grafted radial artery blood flow in CABG surgery.

A-229 Room C, 10/17/2000 2:00 PM - 4:00 PM (PS)
Dose Responsiveness to Inhaled Nitric Oxide Therapy in Adult Cardiac Surgery Patients *Alann R. Solina, MD; Steven H. Ginsberg, MD; Denes Papp, MD; Tyrone Krause, MD; William Grubb, MD, Anesthesiology, UMDNJ-Robert Wood Johnson Medical School, New Brunswick, NJ, United States.* NO doses greater than 10 PPM are not associated with greater reductions in PVR in adult cardiac surgery patients.

A-230 Room C, 10/17/2000 2:00 PM - 4:00 PM (PS)
Postoperative Myocardial Ischemia Is Associated with Nitric Oxide Depletion *Claudia D. Spies, MD; Hartmut Kern, MD; Jochem Grosse, MD; Wolfgang J. Kox, MD, Anesthesiology and Intensive Care, Charite, HU, Berlin, Germany.* Postoperative myocardial ischemia in patients with major surgery was associated with decreased levels of NO.